ARC Discovery Project¹

Safeguarding Rural Australia: Addressing Masculinity and Violence in Rural Settings

Data Report No. 1:
Self-harm Including Suicide

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1. **Introducing this series of data reports**

We have elected to make our first-pass analyses of secondary data for our work-in-progress *ARC Discovery Project – Safeguarding Rural Australia: Addressing Masculinity and Violence in Rural Settings* available online. Our intention is to not only permit the material in this series to be referenced in documents subsequently published by the research team but also to provide a useful resource for other researchers. These reports will be successively updated with more recently published secondary data sourced prior to project completion.


Availability of data and the manner in which they have been collected and consolidated have been major determinants of our analytical approach. Moreover, examination of suitably distinguishable classifications to define varying dimensions of ‘rural settings’ in Australia was essential. In summary, the introductory report validates the depth and breadth of our inclusive view of violence and presents the schematic which describes the framework designed to structure and manage secondary data analyses.

2. **Focus of this report**

Data Report No. 1 focuses on our examination of extant data which have been sourced with respect to self-harm and suicide in Australia. Moreover, specific areas of concern regarding elevated rates of suicide for rural males and data anomalies which emerged during our examination of these data are discussed. These aspects of violence, particularly with respect to males living in regional and remote Australia, were central to a paper presented by the authors at the Institute of Australian Geographers Conference in September 2009 (McIntosh, Carrington and Scott 2009) and another at the Australian and New Zealand Society of Criminology in November 2009 (Carrington, Scott and McIntosh 2009). Additional commentary resulting from exploration, examination and analyses of secondary data is published online in complementary data reports.

3. **Limitations to existing data**

Australian Bureau of Statistics (ABS) data point to the number of suicides recorded in Australia in the decade from 1997 to 2007 decreasing by 30% overall, from 2,720 to 1,881. Historically, around 80% of all suicides have been males (77% in 2007). In spite of the decline in number of statistically recorded suicides, rates remain alarmingly high in comparison with other external causes of death. For instance, more people die annually in Australia as a result of suicide than through Motor Vehicle Traffic Accidents (MVTAs).

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3 External causes of death relate to cases where the underlying cause of death is external to the body.

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The ABS has recently acknowledged anomalies and limitations in data quality with respect to published suicide statistics (ABS 2008, 2009, Cat. No. 3303.0). Accordingly, most recent data for suicides are to be subjected to revision with updated statistics for 2007 to be available around April 2010. In fact, some researchers (for example, Mendoza 2009) have expressed a view that official figures for 2007 may be underestimated by as much as 45%. More conservative estimates in recent Australian Institute of Health and Welfare (AIHW) research place the under-reporting at somewhere between 3% and 16% (Harrison et al. 2009). Lifeline Australia estimates the extent of under-reporting for 2007 at between 20% and 30% (O’Neil 2009). Further insights into limitations in data quality are contained in an examination of source material for the period 2004-05 by Henley and Harrison (2009). This exploration identified that there has been under-reporting of deaths in Australia as a result of not only suicides but also homicides and, in New South Wales in particular, fatal MVTAs. Concomitantly, over-reporting is suspected for unintentional injury by mechanisms that are common among suicides and homicides (for example, shootings and hangings).

Under-reporting of suicides has become evident in published statistics for the years since about 2002 (Henley and Harrison 2009). This under-reporting is in part due to the high number of cases with a status of ‘open’ on the National Coronial Information System at the time of ABS processing (ABS 2008, Cat. No. 3303.0). The ABS also noted reluctance by Coroners to make determinations of suicide have impacted on suicide data. Furthermore, cases which could potentially have been suicides (for example, some MVTAs, discharging of firearms, hangings, poisonings, drownings, electrocutions, and so on) but for which the intent was determined to be other than intentional self-harm cannot be separately identified from available data.

4. Elevated rates of suicide for rural males

In Australia’s regional and remote areas4, there is cause, on two accounts, for even greater concern with respect to suicide trends. In the first instance, the Department of Health and Ageing (DHA) (2008, Fact Sheet 18) states that suicide rates have risen substantially in these areas over the past three decades, especially among men. Secondly, males in regional and remote areas have substantially higher rates of suicide and self-inflicted injuries than males in Major Cities or than females in non-metropolitan areas (AIHW 2008, PHE 97; AIHW 2007, PHE 95). The risk of suicide is further statistically compounded for men aged 20 to 44 years (ABS 2007, 3309.0); for older men (over 75); and for men undergoing traumatic life events (DHA 2008, Fact Sheet 17).

Nationally, suicide is around four times more common in men than women. Considerable publicity has been given in recent years to the comparatively high suicide rates among young rural men and men from Indigenous communities. Minimal attention has been given to statistics that tell us that men of all ages who live in regional or remote areas are also in the ‘most at risk’ category, even more so if they’re senior in age (over 75) or experiencing

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4 This series of reports has used, where possible, the ABS Australian Standard Geographical Classification (ASGC) for Remoteness Areas (RAs) to differentiate between the city and the bush and to distinguish varying levels of ‘rurality’ (ABS 2003: Census Paper No. 03/01). RAs are classified as Major Cities (MC), Inner Regional (IR), Outer Regional (OR), Remote (R) and Very Remote (VR). Refer to the introductory report for further information on recognised variations to these classifications.
distress as a result of, for example, prolonged drought conditions, relationship breakdowns and mental and physical health problems.

Our research has a national agenda and, accordingly, we have drawn upon a variety of national data bases in our analysis of secondary data\(^5\). To further substantiate our claims of disparity between the city and the bush, key statistics for Australian males were extracted, examined and summarised. This has permitted us to make some direct comparisons between men living in All Regional and All Remote areas of Australia and their Major City counterparts. As a consequence, we have found evidence for men living in rural or remote areas being among those Australians most at risk of death by suicide. Furthermore, types of accidents, risk factors and risky behaviour that are sometimes associated with self-harm are more evident in rural Australia than in our cities.

Using current published data based on RAs – which, unfortunately, somewhat dated – we have calculated Standardised Prevalence Ratios (SPRs) to more clearly illustrate the magnitude of the inequity in regional and remote areas vis-à-vis Major Cities. The rate of 1.0 was assigned to Major Cities areas. Accordingly a ratio of 0.5 for regional or remote areas would indicate half the occurrence rate of Major Cities and a ratio of 2.0 would indicate double that in Major Cities.

Through this analytical approach, higher fatality rates for men in the bush in comparison with their city counterparts become evident as a result of a range of intentional and unintentional injuries and risky behaviour (see Figure 1). These include higher rates of:

- Fatalities from intentional external cause injuries including suicide (for Indigenous and non-Indigenous males) and homicide (data available only at aggregated level for All persons)
- Fatal Motor Vehicle Traffic Accidents (MVTA) (for Indigenous and non-Indigenous males)
- Other fatal external injuries (for Indigenous and non-Indigenous males)
- Personally risky behaviour (data available only at aggregated level for All males)
- Alcohol short- and long-term risk (data available only at aggregated level for All persons)

Results show that rates of male suicides increased according to the remoteness of areas of usual residence. Specifically, prevalence ratios for male suicides for the years 2002-04 ranged from 1.25 times greater in Inner Regional areas than in Major Cities areas to 2.57 times in Very Remote areas.

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\(^5\) Some administrative and survey sources have not used the ASGC RA classifications.
Figure 1: Selected SPRs for death from external causes, by Remoteness Area, Australia 2002-04

(Sources:
1. SPRs for average annual male deaths from suicide, 2002-04; after AIHW 2008, PHE 97.
2. SPRs for deaths from homicide, 2004-05; after Henley and Harrison (2009). As numbers are not large (national total of 215 in the 2004-05 financial year according to Henley and Harrison’s reporting), significant fluctuations in homicide deaths between years can occur.
3. Average annual MTVA deaths for males, 2002-04; after AIHW 2008, PHE 97.
4. Average annual male injury ‘deaths from all causes, 2002-04; after AIHW 2008, PHE 97; AIHW 2007, PHE 95.
5. SPRs (data for Remote and Very Remote combined) for risky behaviour while intoxicated, persons aged 12 and over, 2004; after AIHW 2008, PHE 97. The AIHW defines personally risky behaviour as working, swimming, boating, driving or operating hazardous machinery while intoxicated with alcohol or an illicit drug. Socially risky behaviour is defined as creating a public disturbance, damaging property, stealing or verbally or physically abusing someone while intoxicated with alcohol or an illicit drug.
6. SPRs (data for Remote and Very Remote areas combined) for all persons aged 14 years or more by short- and long-term alcohol risk status, 2007; after AIHW 2008, PHE 107)
Where available data permitted differences between All males and Non-Indigenous males to be distinguished (that is, for suicides, MVTAs and external causes deaths), minimal variations in SPRs were evident for Inner Regional, Outer Regional and Remote areas. Thus, by default, overall mortality rates for suicide, MVTAs and for all external injuries for Indigenous and non-Indigenous males in other than Very Remote areas were similar for the periods examined. Alarmingly higher SPRs for Indigenous males in Very Remote areas in comparison with All males in those areas are cause for even greater concern about levels of wellbeing for Indigenous men in these areas.

Suicide among farmers has received increasing coverage in both academe and the popular press in recent years. Contemporary Australian research by Judd et al. (2006) found that the elevated rate of suicide in rural areas and more specifically among farmers does not seem to be simply explained by an elevated rate of mental health problems. Individual personality, gender and community attitudes that limit people’s abilities to acknowledge or express mental health problems and seek help for these may be significant risk factors for suicide in farmers. This potentially supports earlier research which showed that Australian farmers reflect values of autonomy, independence, and survival (Tanewski et al. 2000; Voyce 1997). Thus farmers might find compassion towards themselves or others for perceived failure difficult to manage.

5. Examination of data anomalies

Using statistical data to map patterns of change over time is an important tool for providing sound foundations for understanding and explaining influential factors and, where appropriate, affecting change. Unfortunately, producing a historical record often proves to be an arduous if not impossible task for researchers due to lack of continuity in data strings and differences in the way data are collected and reported over time. In spite of this, we have teased out some data anomalies with respect to firearms fatalities and MVTAs which beg explanation in the light of contradictory published trends. These are discussed in the following section.

Firearm fatalities
Statistics for firearm fatalities over the past decade show, on the one hand, declining numbers of suicide through use of firearms (ABS 2009, Cat. No. 3303.0; ABS 2008, 2006, Cat. No. 4510.0; Mouzos and Rushforth 2003). The number of accidental, undetermined and legal intervention deaths from firearms, on the other hand, has increased at an astonishing rate. Specifically, for the two-year period 2006-07, the annual average number of reported firearm suicides decreased by 33% (to 161) when compared with the five-year annual average of 241 during the period 1998-2002. Over the same time span, ‘other’ (accidental, undetermined and legal intervention) firearm fatalities increased by a factor of more than four from a five-year annual average of 37 to an annual average of 166 for 2006 and 2007. Figure 2 illustrates the magnitude of the conundrum. Comparative data for 2003-05 are not available (n.a.) in that it could not be sourced.
Farmers and their associates are arguably more likely than city dwellers to use firearms to self harm due to the availability of weapons. Even when firearms are correctly registered and securely stored by licenced owners, many other persons (including family members, friends and employees) are often aware of their existence and location and may have legitimate access. Unfortunately, we’ve not been able to tease out firearms data relevant to people who live and/or work on the land or, for that matter, in rural Australia.

**Motor Vehicle Transport Accidents (MTVAs)**

Statistics for road traffic fatalities have illustrated a continuing overall downward trend since about 1970 (ABS 2008, 2007, 2006, Cat. No. 1301.0). For example the road toll in 2006 of 1,601 was less than half the 1970 figure of 3,798 (Australian Transport Safety Bureau 2007). Number of road fatalities per 10,000 registered vehicles has similarly decreased from 8.0 in 1970 to 1.1 by 2006 (ABS 2008, Cat. No. 1301.0; Australian Transport Safety Bureau 2007).

Despite these overall downward trends, the number of single vehicle crashes in recent years has increased from 584 in 1999 to 685 in 2006, the latest year for which we could source national data (ABS 2008, 2007, 2006, Cat. No. 1301.0) (Figure 3). Similarly, the proportion of fatal crashes involving single vehicle crashes has increasing from 37.6% of total fatal crashes in 1999 to 47.0% in 2006 with this characteristic having become the most common fatal crash type (Figure 3). Comparative data for 2002-03 could not be sourced.
There are several potential reasons for these patterns in single vehicle fatalities going against the overall downward trend including, unfortunately, motor vehicles used as mechanisms for intentional harm. In other words, MVTAs may sometimes be undeclared suicides or even homicides.

Perhaps more so than with the discharge of firearms, such cases are impossible to accurately determine. When coroners have good reasons to suspect harm was intended as opposed to accidental, a supplementary reporting classification would permit ‘grey’ cases to be identified. This would help to further inform the structuring of programs and resource allocations.

6. ‘Excess deaths’ from suicides in All Regional and All Remote Australia

Concern about the magnitude of the inequity between Major Cities area and rural Australia has been such that, for leading causes of death during the years 2002-04, the AIHW (2008, PHE 97) reported ‘excess deaths’ in All Regional/All Remote areas by comparison with the Major Cities area. Excess deaths represent the difference between the number of deaths observed in each ASGC Remoteness Area and the number expected if Major Cities age-specific death rates had been applied in each area.

Injury as an external cause of death stood out as being of particular importance in the AIHW (2007, PHE 95) study of mortality due to the large number of excess deaths. For males living outside Major Cities areas, 23% of the total number of excess deaths from all causes was as a result of acute injury. The average annual number of excess fatalities recorded for suicide, MVTAs and from other external injury causes during 2002-04 are shown in Figures 4 and 5 for, respectively, All males and Non-Indigenous males.
Given the recognised under-reporting of suicides since around 2002 (Henley and Harrison 2009), a more accurate representation of injury death categories in Figures 4 and 5 might show an increase in the suicide excess deaths sector and a concomitant reduction in the Other external injuries category. Reductions might also be anticipated in some non-injury related categories. The potential impact of more accurate reporting of MVTA fatalities is unclear given that, on the one hand, some MVTA fatalities, particularly single vehicle accidents, might well have been suicides. On the other hand, the potential under-reporting
of MVTA deaths – as has been suggested for some states based on declining rates over recent years (refer to Figure 6) – could ameliorate this factor.

Figure 6: Fatal crashes by State/Territory, Australia, 2002-07
(Source: Department of Infrastructure, Transport, Regional Development and Local Government 2008, Table 29))

Excess deaths provide an absolute measure of magnitude and hence a clear understanding of the absolute size of disadvantage in ASGC RAs for particular causes of death in terms of human lives lost. This is evident in Figure 7 which illustrates that 143 more males in All Regional areas committed suicide on average each year during the period 2002-04 than if the same suicide rate for Major Cities areas applied (AIHW 2008, PHE 97). The annual average excess deaths in All Remote areas during the same period totaled 40 males. For non-Indigenous males, All Regional and All Remote excess deaths were, respectively, 134 and 12.
7. Conclusion

Some results from our analysis of secondary data illustrate that All Regional and All Remote areas of Australia have alarmingly elevated national patterns of male deaths as a result of acute external causes, particularly through suicides, compared with Major City dwellers. Additionally, we have highlighted specific areas of statistical reporting which may require further investigation and clarification. These data also generally support the contention that some suicide cases may have been determined to be other than intentional self-harm with firearms and motor vehicles among the mechanisms used.

More accurate representations of statistics for suicide are essential to better inform not only research but also resource allocation, procedures, policies and programs that address relevant issues with the view to ameliorating human suffering. Results can be used to target proactive and preventative programs of risk management for threatened populations, especially men living in rural Australia. Compassion or concern for the wellbeing of surviving family members, friends and/or communities may be reasoned as justification for the private or public masking of individual occurrences of suicide. Unfortunately, the cumulative effect of under-reporting only serves to diminish the extent of the problem, arguably to the long-term detriment of many.
8. Other reports in this series

Other *Safeguarding Rural Australia: Addressing Masculinity and Violence in Rural Settings* reports within this series are:

- *Introduction, Framework and Background to Secondary Data Analysis*
- *Data Report No. 2: Intentional Violence – Suicide, Homicide, Assault, Sexual Assault, Family Violence, Child Abuse, Harassment and Stalking, Alcohol-related Violence, Animal Abuse*
- *Data Report No. 3: Unintentional Violence – Transport Accidents, Occupational Exposures and Hazards, Other Unintentional Violent Injuries*
- *Data Report No. 4: Risk Taking Behaviour – Misuse of Alcohol, Illicit Drugs, Firearms Use and Abuse, Other Risky Behaviour*
- *Data Report No. 5: Consequences of Violence – Juvenile Offenders, Long-term Health Consequences, Anxiety and Repression, Other Chronic Disabilities*

These reports as well as journal articles based on original research outcomes from the project that have been published or accepted for publication are available as ePrints through the project home page at [http://wwwljrclawquteduau/research/projects/rural/](http://wwwljrclawquteduau/research/projects/rural/).

Bibliography


Carrington, Hogg, McIntosh, Scott 2009